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CONFIRMATION NO. 8699

|  |   |                               |   |  |                                |
|--|---|-------------------------------|---|--|--------------------------------|
| <b>SERIAL NUMBER</b><br>10/075,332   | <b>FILING OR 371(c) DATE</b><br>02/14/2002<br><b>RULE</b>   | <b>CLASS</b><br>340           | <b>GROUP ART UNIT</b><br>2612   | <b>ATTORNEY DOCKET NO.</b><br>CRNT-0068-US |                                |
| <b>APPLICANTS</b><br>Steven R Baker, Terre Haute, IN;<br>Paul A. Kline, Gaithersburg, MD;<br>Brett Gidge, Germantown, MD;<br>James D. Mollenkopf, Fairfax, VA;   |   |                               |   |  |                                |
| <b>** CONTINUING DATA *****</b><br>This appln claims benefit of 60/268,519 02/14/2001<br>and claims benefit of 60/268,578 02/14/2001   |   |                               |   |  |                                |
| <b>** FOREIGN APPLICATIONS *****</b>   |   |                               |   |  |                                |
| <b>IF REQUIRED, FOREIGN FILING LICENSE GRANTED** SMALL ENTITY **</b><br>** 04/03/2002  |   |                               |   |  |                                |
| Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no<br>35 USC 119 (a-d) conditions <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after<br>met Allowance<br>Verified and Acknowledged <u>Examiner's Signature</u> <u>Initials</u> |   | <b>STATE OR COUNTRY</b><br>IN | <b>SHEETS DRAWING</b><br>9  | <b>TOTAL CLAIMS</b><br>57                  | <b>INDEPENDENT CLAIMS</b><br>3 |
| <b>ADDRESS</b><br>64713  |   |                               |   |  |                                |
| <b>TITLE</b><br>POWER LINE COMMUNICATION DEVICE AND METHOD   |   |                               |   |  |                                |
| <b>FILING FEE RECEIVED</b><br>918  | FEES: Authority has been given in Paper<br>No. _____ to charge/credit DEPOSIT ACCOUNT<br>No. _____ for following: |                               | <input type="checkbox"/> All Fees<br><input type="checkbox"/> 1.16 Fees ( Filing )<br><input type="checkbox"/> 1.17 Fees ( Processing Ext. of time )<br><input type="checkbox"/> 1.18 Fees ( Issue )<br><input type="checkbox"/> Other _____<br><input type="checkbox"/> Credit |  |                                |